



Lottery Application

Only one lottery application per person will be accepted. "Person," as defined in ARM 42.12.401, means any individual, firm, partnership, limited liability company, corporation or association. Incomplete applications will be disqualified.

Section 1 – Lottery Type Information

Quota Area **Bozeman/Belgrade** Tracking Number **ABFL1**
For DOR Office Use

Lottery Type

- ☒ **FLOATER ALL-BEVERAGES LICENSE - There is one current lottery for floater all-beverages licenses—the Bozeman/Belgrade lottery with two licenses**
Each "person" is limited to applying once for this lottery. If a person applies more than once, all applications submitted by that person will be disqualified.

Section 2 – Ownership Information

Legal Applicant/Entity (not the business name) _____

Contact _____ Email _____ Phone _____

Mailing Address _____
Address City State Zip

Entity Type (choose one)

- ☐ Corporation ☐ Partnership ☐ LLC ☐ Other _____
☐ Sole Proprietor _____
Name Social Security Number Date of Birth

Section 3 – Corporate Statement

If applying as an entity, list all shareholders, members and/or partners below. Use an additional sheet of paper if necessary. Note that each person listed must be over the age of 19.

1	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
2	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
3	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
4	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership

Section 3 – Corporate Statement continued.

Officers and Directors (Use additional sheet of paper if necessary.)

1	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
2	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
3	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title
4	Officer or Director Name	SSN (optional)
	Address	
	Date of Birth (optional)	Title

Section 4 – Floater Application Requirements

“Floater” means an “all-beverages license that may be transferred to a new location outside the quota area for which it was originally issued.” This type of license cannot be mortgaged or sold for five years after the transfer. A floater license issued as the result of a lottery will have a gaming restriction.

Has the applicant applied for a “Floater” All-Beverages lottery within the previous 12 months?

☐ Yes ☐ No (If yes, you do not qualify for entry in this lottery.)

Does the applicant have ownership interest in an All-Beverages license?

☐ Yes ☐ No (If yes, you do not qualify for entry in this lottery.)

All applicants must submit an irrevocable letter of credit from a financial institution guaranteeing the applicant a \$100,000 line of credit. The letter must state that the financial institution will not withdraw the line of credit or cancel the letter for a one-year period from the date of the lottery drawing. Acceptable letter content includes the following:

This irrevocable letter of credit is to confirm that [bank] has approved [lottery applicant] for a \$100,000 line of credit for the purchase of a liquor license should they be the successful winner of the all-beverage floater license lottery. [Bank] guarantees that it will not withdraw this line of credit or cancel this letter. [Bank's] commitment under the line of credit will expire on [one year from date of lottery drawing].

The department will not accept letters stating that the applicant is eligible to receive a bank loan that do not include a guarantee that the bank will not withdraw the line of credit or cancel the letter, nor will it accept letters stating that the applicant has the ability to pay \$100,000 without a guaranteed line of credit. Any application without an acceptable irrevocable letter of credit will be disqualified from the lottery.

☐ Attached is an irrevocable letter of credit from a financial institution guaranteeing a \$100,000 line of credit.

Section 5 – Declaration and Affidavit

If my application is drawn in the lottery, I understand that I must submit a completed license application and the appropriate fees within 60 days of being notified that I was the successful applicant. I further understand that information concerning ownership on this application must be consistent with the license application and supporting documents or I will be disqualified. For example, if you complete this application as an “individual,” and are the successful applicant, your subsequent license application must also be as an “individual.”

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making this application, and that the responses provided, including any accompanying information, are true, correct and complete.

_____ Signature	_____ Date	_____ Printed Name	_____ Title
_____ Signature	_____ Date	_____ Printed Name	_____ Title
_____ Signature	_____ Date	_____ Printed Name	_____ Title

You must submit this lottery application by the deadline set in the publication notice. Mail to:

Montana Department of Revenue
Liquor Control Division
PO Box 1712
Helena, MT 59624-1712

Questions? Call at (406) 444-6900, or fax to 406-444-0722.